Structure

Phase III: Gender, Power and Sex

Agency ⟷ Relations

Strategic Impact Inquiry Research Summary

The Context: After 12 years of civil war engendered by discrimination, marginalization, the denial of rights and exclusion of pockets of the population, Burundi continues to struggle in post-conflict recovery. Following the war, sexual and domestic violence has been on the rise and, facing rape-related stigma and a strong cultural taboo on discussing sexual relations, women rarely report abuse in spite of the rapid spread of HIV/AIDS across the country.

The Project: CARE Burundi assessed the impact of Project Umwizero (*positive future for women in Burundi*), which began in 2006 in three provinces and is in its second phase (until 2013). Project Umwizero works to build solidarity and empowerment among women by:

- Mobilizing and supporting solidarity groups and their leadership to provide safe space for women to gather;
- Enhancing women's life skills through training on sexual/reproductive health, including HIV/AIDS and human rights;
- Providing microfinance services as an entry point to raise women's social and economic status in communities; and
- Engaging women in decision-making by access to/control of productive resources.

CARE Burundi's Strategic Impact Inquiry (SII):

Unlike other SII sites, CARE Burundi already explored women's definitions of empowerment in previous studies. For the SII, the study focused on:

- How participants' lives have changed in terms of empowerment due to their participation in Umwizero;
- How the group process improved relations between men and women, women's roles in conflict resolution and relationships in the broader community;
- How the project impacted women's vulnerability to HIV;
- The relationship between empowerment and HIV risk.

The [Strategic Impact Inquiry](#) (SII) seeks to evaluate CARE's impact on women's empowerment. For more information on CARE Burundi's SII Phase Three, please email: PQlibrarian@care.org.

The Methods: CARE Burundi's SII was rooted in qualitative, participatory research.

RESEARCH DESIGN

- **FormativeWorkshop:** Develop research guides, empowerment indicators defined by participants, and identify domains
- **Research Team:** Program staff, partners

IN THE FIELD

- 110 respondents (24 men, 86 women)
- **Closed Questionnaire** (110 respondents): Knowledge of HIV and sexual behavior, availability and utilization of services, collective agency, gender based violence, HIV/AIDS stigma, gender norms
- **Semi-Structured Interview** (85 respondents): Gender relations, conflict resolution, decision-making, impact of groups, life changes, group dynamics
- **Focus Group Discussions** (6 groups of women members, former members and non-members): Solidarity group functionality, concepts of inclusion, sustainability of groups

DATA ANALYSIS

- **Triangulation:** Data validation across methods, locations and researchers
- **Reflective Process:** Team reflected on initial observations and challenges in order discuss observations and research approaches
- **Participatory Analysis:** Team participated in each aspect of qualitative analysis. The team also engaged community-based feedback and validation processes linked to reflective program implementation
- **Quantitative Analysis:** SPSS ANOVA

Limitations:

- Small sample made some quantitative analyses impossible.
- Level of qualitative research skills within team compromised the quality of results.

BURUNDI

For more information, please contact Domitille Ntacobakinvuna (dntacobakinvuna@care.org.bi).

Phase III: Gender, Power and Sex

Strategic Impact Inquiry Research Summary

Women's Own Views on Empowerment

AGENCY
Decision-making and management (sex, resource management, child-rearing at household and community levels), Free mobility, sexuality Access to income/material assets, Leadership Conflict resolution

RELATIONS
Negotiating sexual relations, problem solving Shared responsibilities, respect , trust and security with men Respect for women in community meetings, commitmes, ceremonies, structures, extended family, work and church Impact of solidarity group on community Group solidarity

STRUCTURE
Matrimonial stablity through status End impunity , silence around gender-based violence

Women's Empowerment and HIV Risk

Knowledge and Action
- High knowledge on HIV, but little use of protection
- Mobility, trainings and income led to knowledge of and greater use of services, and knowledge of results

Women's Roles and Norms
- Women's voices increasingly heard and respected in household/community, which may reduce HIV risk

Taboo and Stigma
- Taboo on condom use, limits women's ability to discuss or negotiate safe sex
- Stigma around HIV/AIDS limits women's ability to communicate about HIV to husbands

Implications on CARE Burundi's Women's Empowerment Program:

Women's Realities and Strategies: *In an environment where money, stigma and fear of discrimination/rejection prevent women from seeking sexually transmitted infection services:*
- CARE must work to understand women's choices, relationships and strategies for self-efficacy around HIV and how to assure protection.
- CARE must foster communication between couples, particularly around issues of sexual relations.

Engaging Men and Local Power Holders, *continue to:*
- Be aware of political situation and changing context to shape and leverage work.
- Work with men through trainings and identify male role models to support women's empowerment, fight violence.
- Ensure groups work effectively with local authorities in meetings and are not exploited by them.

Inclusive Group Dynamics: *The study found that women in solidarity groups can exclude or even exploit one another. Therefore, programs must:*
- Strengthen group management, transparency.
- Develop a strategy to work with oralists and have meaningful impact on the poorest, widows and Batwa minorities.
- Promote inclusiveness among leaders and analyze how policies may affect members differently.

Continue to:
- Be aware of tensions arising from women's participation in groups and develop interventions to ensure stronger relations both within groups and with others.
- Recognize that targeting women to participate can exclude younger women, and explore how to reach them.

Impact on Empowerment and Vulnerability to HIV

Agency	Structure	Relations
• Self-esteem, confidence, usefulness (*Batwa*) • Mobility (except young/richer women) • Conflict management, decision-making in farming, spending, <u>not</u> sexual choices • Group belonging, organizing together • Communication skills, speaking in public • Higher income, improved hygiene, better dress • Knowledge on HIV and services • Low condom use • Members use services more (have own money to screen secretly)	• Violence against women, polygamy common and normalized • Accountable local community structures	• Negotiate with husbands (some do not) • Trust in couples, though trust issues persist • Solidarity, mutual support (tensions with trust, distribution of benefits, exclusion) • Changing statuses of Batwa minority, poor in relation to land owners and society • Greater negotiation, voice and event-organizing responsibilities in community • Advocacy against polygamy, limited effect • Tension between members/non-members • Infidelity, polygamy unchanged

*Impact varies immensely by women's status in community (from age, ethnicity, and poverty).

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